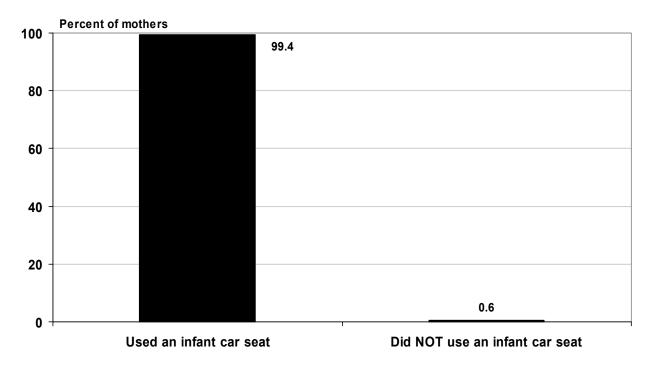
INFANT HEALTH AND SAFETY

Idaho PRATS Baby Car Seat Use (From Hospital to Home) 2001

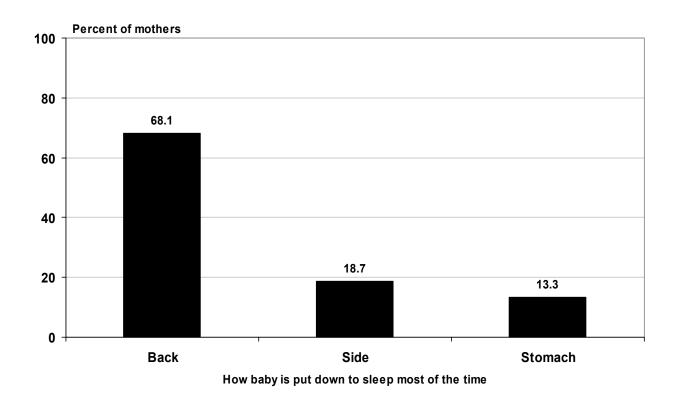


Infant car seat use from hospital

Summary

PRATS respondents were asked if they brought their new baby home using a car seat. Almost all mothers (99.4 percent) reported use of an infant car seat when they brought their new baby home from the hospital.

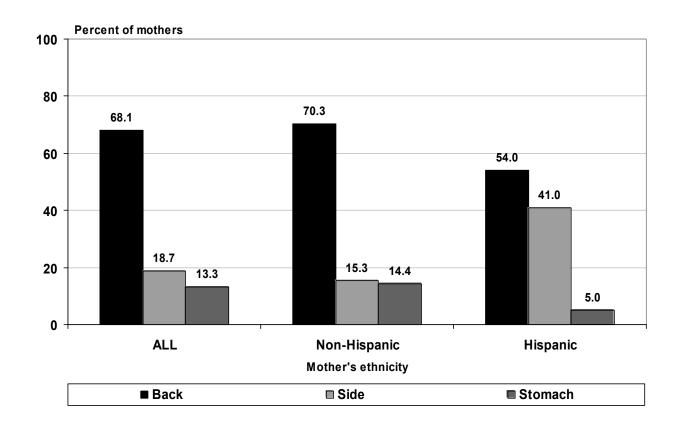
Idaho PRATS Baby Sleep Position 2001



Summary

Since 1992, the American Academy of Pediatrics has recommended that infants be put down to sleep on their backs to reduce the risk of Sudden Infant Death Syndrome (SIDS) (Recommendation 9946). PRATS results indicate that 68.1 percent of Idaho resident adult mothers put their new baby down to sleep on his/her back most of the time. The prone sleep position (stomach) is a major risk factor for SIDS. Nearly 1 of 8 Idaho resident adult mothers (13.3 percent) reported that they placed their baby on his/her stomach to sleep most of the time.

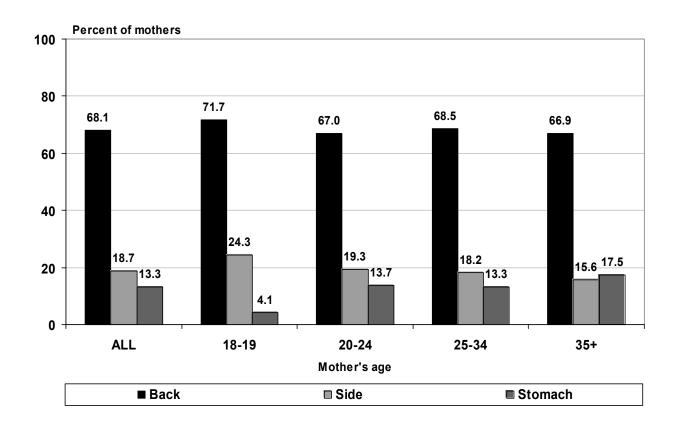
Idaho PRATS Baby Sleep Position By Mother's Ethnicity 2001



Summary

Non-Hispanic mothers were 2.9 times more likely to lay their baby to sleep in the prone position (stomach) than Hispanic mothers. Hispanic mothers were less likely to lay their baby to sleep in the recommended position (back) (54.0 percent) than non-Hispanic mothers (70.3 percent). The difference was statistically significant (p=.05).

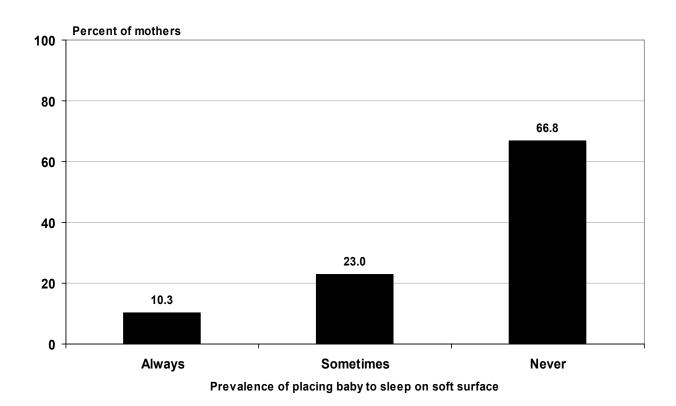
Idaho PRATS Baby Sleep Position By Mother's Age 2001



Summary

Idaho resident adult mothers aged 35 and older were the most likely to lay their baby to sleep in the prone (stomach) position (17.5 percent). Mothers aged 18 to 19 were significantly less likely to lay their baby to sleep in the prone position (4.1 percent). The difference was statistically significant (p=.05).

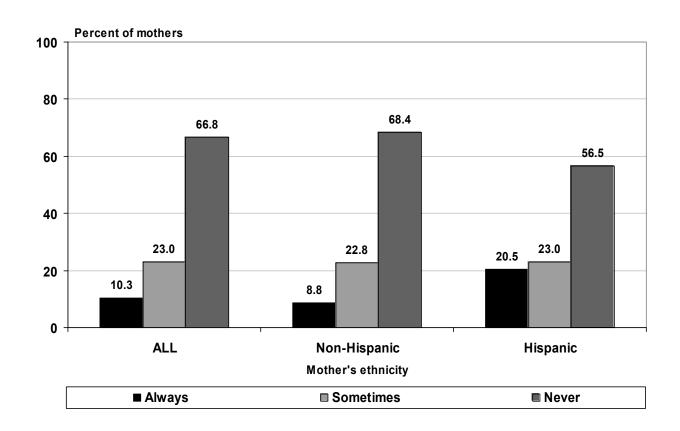
Idaho PRATS Prevalence of Soft Baby Sleep Surface 2001



Summary

The National Institute of Child Health and Human Development (2003) and the U.S. Consumer Product Safety Commission warn against placing any soft, plush, or bulky items, such as pillows, quilts, comforters, sheepskins, or stuffed toys in the baby's sleep area. PRATS respondents were asked how often their baby slept on something soft, like a fluffy blanket or comforter, soft pillow, featherbed, or sheepskin. Two-thirds (66.8 percent) of respondents reported that their baby never slept on soft surfaces. One in ten respondents (10.3 percent) reported that their baby always slept on soft surfaces.

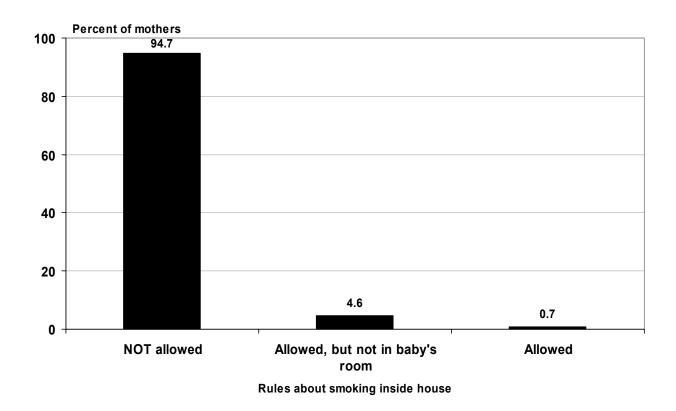
Idaho PRATS Prevalence of Soft Baby Sleep Surface By Mother's Ethnicity 2001



Summary

Of Idaho resident adult mothers, Hispanic mothers were 2.3 times more likely to always lay their baby to sleep on something soft such as a fluffy blanket or comforter, soft pillow, featherbed, or sheepskin (20.5 percent) than non-Hispanic mothers (8.8 percent). The difference was statistically significant (p=.05).

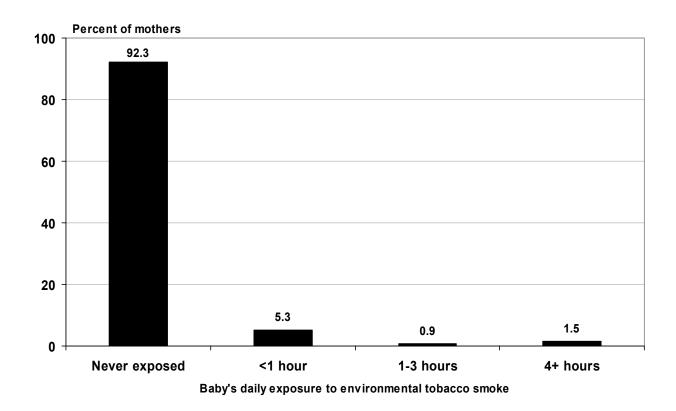
Idaho PRATS Rules About Smoking Inside House 2001



Summary

PRATS respondents were asked about the rules for smoking inside their house. Nearly all Idaho resident adult mothers (94.7 percent) did not allow smoking inside their home. Less than 1 of 20 mothers (4.6 percent) allowed smoking inside their homes, but not in the baby's room. Only 0.7 percent of mothers allowed smoking anywhere inside their home.

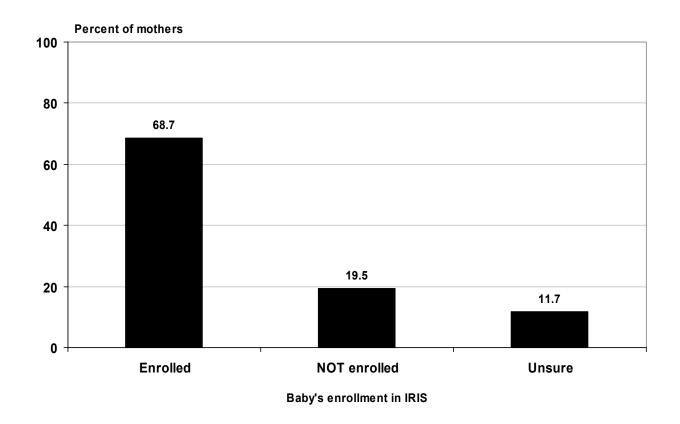
Idaho PRATS Baby's Daily Exposure to Environmental Tobacco Smoke 2001



Summary

PRATS respondents were asked about how many hours a day, on average, their new baby was in the same room with someone who was smoking. Only 7.7 percent of Idaho resident adult mothers reported that their new baby had some daily exposure to environmental tobacco smoke. Of these cases, slightly over two-thirds were exposed for less than an hour a day. Of those exposed for more than an hour a day, the average exposure was 7.4 hours a day.

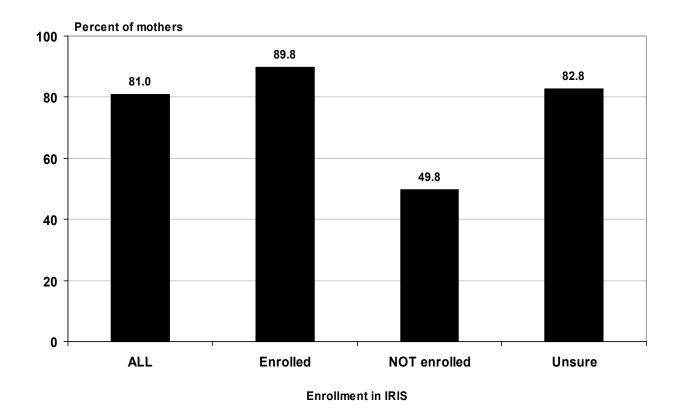
Idaho PRATS Enrollment in Idaho's Immunization Reminder Information System (IRIS) 2001



Summary

Idaho's Immunization Reminder Information System (IRIS) is a statewide computer–based system that keeps track of immunization records. Two-thirds (68.7 percent) of Idaho resident adult mothers reported that their baby was enrolled in IRIS.

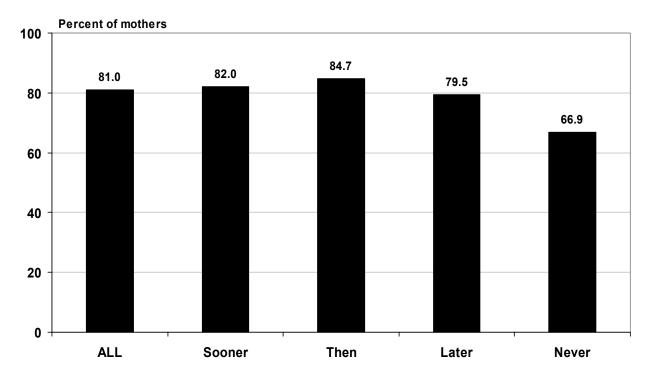
Idaho PRATS Prevalence of Up-to-Date Immunizations By Enrollment in Idaho's Immunization Reminder System (IRIS) 2001



Summary

Nearly 9 of 10 PRATS respondents whose babies were enrolled in Idaho's Immunization Reminder Information System (IRIS) (89.8 percent) reported that their baby's immunizations were up-to-date. Respondents whose babies were enrolled in IRIS were 1.8 times more likely to report that their baby's immunizations were up-to-date than mothers whose babies were not enrolled. More than 8 of 10 respondents who were unsure if their baby was enrolled in IRIS (82.8 percent) reported that their baby's immunizations were up-to-date. The difference between these groups was statistically significant (p=.05).

Idaho PRATS Prevalence of Up-to-Date Immunizations By Intendedness of Pregnancy 2001

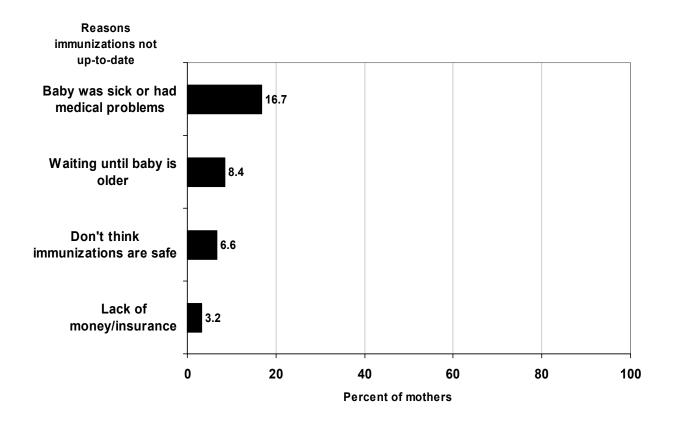


When mother intended to become pregnant

Summary

PRATS respondents were asked whether their baby's immunizations (shots) were upto-date according to the immunization schedule. Overall, 81.0 percent of Idaho resident adult mothers reported that their baby's immunizations were up-to-date. Mothers who reported that they had never wanted to be pregnant were the least likely to have their baby's immunizations up-to-date (66.9 percent). The difference was statistically significant (p=.05).

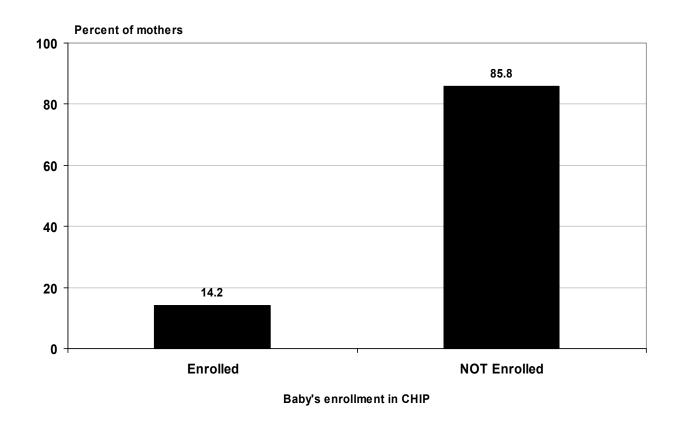
Idaho PRATS Selected Reasons for Not Having Immunizations Up-to-Date 2001



Summary

PRATS respondents were asked why their baby's immunizations (shots) were not up-to-date according to the immunization schedule. The most common reason was that their baby was sick or had medical problems (16.7 percent). Other common reasons were wanting to wait until the baby was older (8.4 percent), the belief that immunizations are not safe (6.6 percent), and the lack of money or insurance to pay for immunizations (3.2 percent).

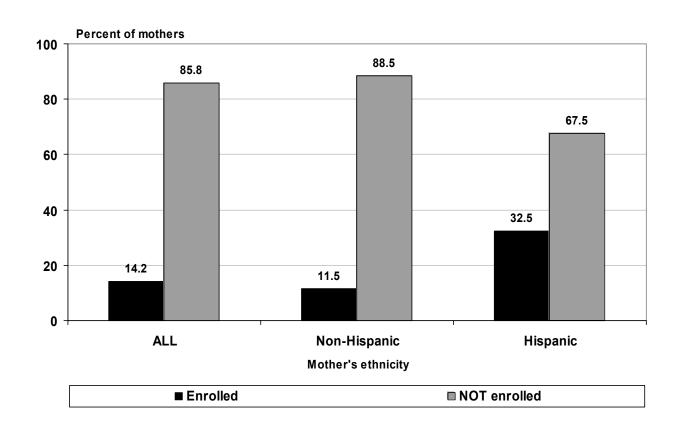
Idaho PRATS Enrollment in Idaho's Children's Health Insurance Program (CHIP) 2001



Summary

Idaho's Children's Health Insurance Program (CHIP) provides health care coverage for Medicaid eligible children. These are children of families with incomes between 133% and 150% of poverty guidelines. One of seven PRATS respondents (14.2 percent) had enrolled their baby in CHIP. Almost 1 of 5 mothers who did not enroll in the program did not do so because they believed their baby was not eligible (18.4 percent).

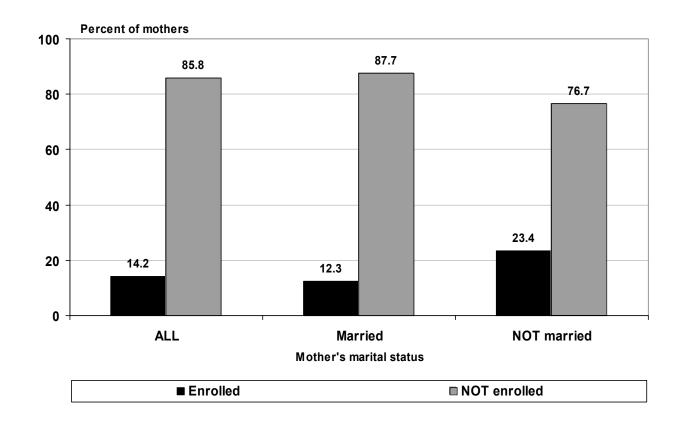
Idaho PRATS Enrollment in Idaho's Children's Health Insurance Program (CHIP) By Mother's Ethnicity 2001



Summary

Enrollment in Idaho's Children's Health Insurance Program (CHIP) varied by mother's ethnicity. Hispanic mothers were 2.8 times more likely to enroll their child in CHIP than non-Hispanic mothers. The difference was statistically significant (p=.05).

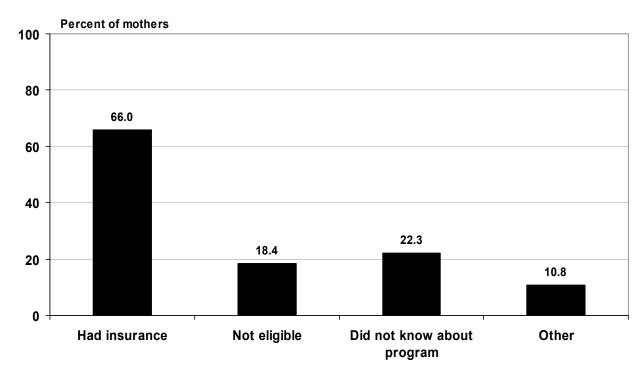
Idaho PRATS Enrollment in Idaho's Children's Health Insurance Program (CHIP) By Mother's Marital Status 2001



Summary

Enrollment in Idaho's Children's Health Insurance Program (CHIP) varied by mother's marital status. Mothers who were not married were 1.9 times more likely to enroll their child in CHIP than married mothers. The difference was statistically significant (p=.05).

Idaho PRATS Reasons for Not Enrolling in Idaho's Children's Health Insurance Program (CHIP) 2001

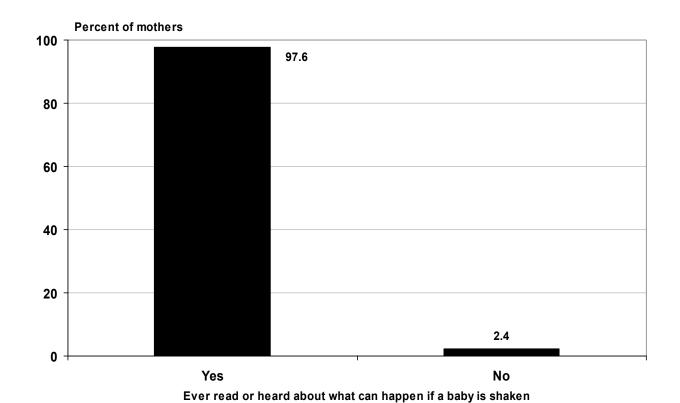


Reasons for not enrolling in CHIP

Summary

The most common reason among Idaho resident adult mother's for not enrolling their baby in CHIP was already having insurance for their baby (66.0 percent). Other reasons including believing that their baby was not eligible for the program (18.4 percent) and not knowing about the program (22.3 percent).

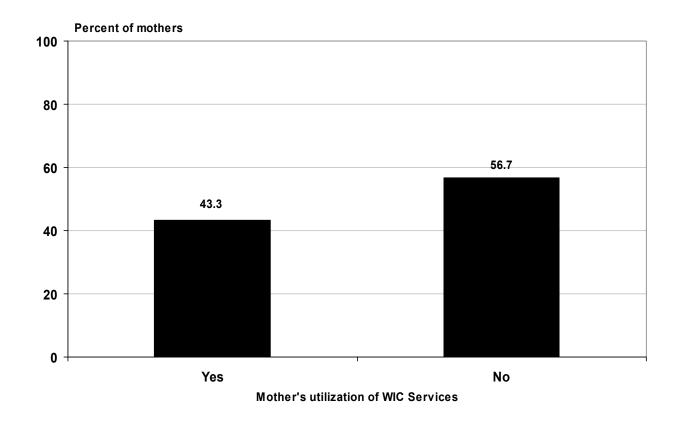
Idaho PRATS Knowledge of Consequences of Shaking a Baby 2001



Summary

Vigorous shaking of an infant can lead to shaken baby syndrome resulting in brain damage that could lead to mental retardation, speech and learning disabilities, paralysis, seizures, hearing loss and even death (Palmer 1998). Only 2.4 percent of Idaho resident adult mothers had not read or heard about what can happen if a baby is shaken.

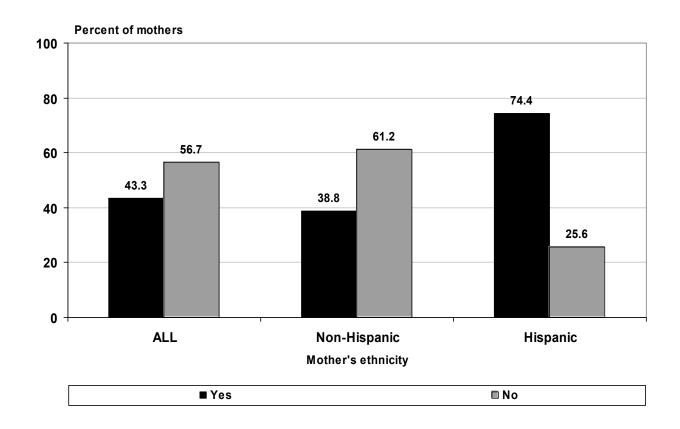
Idaho PRATS Participation in the WIC Program After Delivery 2001



Summary

WIC (Idaho Special Supplemental Nutrition Program for Women, Infants, and Children) is a preventive health and nutrition program for pregnant and breastfeeding women, infants, and children under the age of five providing short-term assistance to families through nutrition and breastfeeding counseling and education, along with access to medical care and other health and social referrals. Just under half (43.3 percent) of Idaho resident adult mothers have used WIC services.

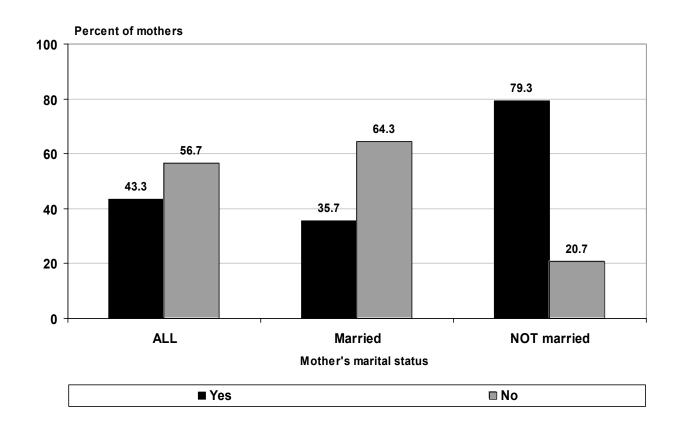
Idaho PRATS Participation in the WIC Program After Delivery By Mother's Ethnicity 2001



Summary

Utilization of Idaho Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) varied among Idaho resident adult mothers by mother's ethnicity. Hispanic mothers were 1.9 times more likely to have used WIC services after delivery than non-Hispanic mothers. The difference was statistically significant (p=.05).

Idaho PRATS Participation in the WIC Program After Delivery By Mother's Marital Status 2001



Summary

Utilization of WIC (Idaho Special Supplemental Nutrition Program for Women, Infants, and Children) after delivery varied among Idaho resident adult mothers by mother's marital status. Mothers who were not married were 2.2 times more likely to use WIC services than married mothers. The difference was statistically significant (p=.05).

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